

CLAIMS ONLY

Application Number

.. Filling Date

Applicant(s)

CLAIMS	AS FILED 8/24/20		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1						
2						
3						
4						
5						
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44						
45						
46						
47						
48						
49						
50						
Total	3					
Indep	30					
Depend	33					
Total						
Claims						

May be used for additional claims or amendments

	Indep	Depend	Indep	Depend	Indep	Depend
51						
52						
53						
54						
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59						
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Indep						
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Claims						